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NOTES FROM THE MEDICAL PRESS

IN CHARGE OF

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BALSAM OF PERU IN COMPOUND FRACTURES.—The *New York and Philadelphia Medical Journal* says: "In *Presse médicale* for December 30 Dumont states that Van Stockum, of Rotterdam, treats compound fractures without any attempt at conventional asepsis, removing simply any foreign bodies from the surface of the wound, and then covering the latter thickly with balsam of Peru, getting it well into the irregularities of surface. If the wound is small, it is filled by means of a syringe. The fracture is then treated as a simple one. A dressing is made of gauze saturated in balsam and absorbent cotton, and the limb is put in plaster or an extension apparatus. There is always fever for three days, which subsequently disappears. At the end of three weeks the bandages are removed to find either a cicatrized wound or one granulating healthily with no sign of inflammation. No amount of pressure will bring pus. The mortified tissues are mummified, and the fracture has united or is doing well. Van Stockum calls his results 'marvellous.' It is not impossible that the balsam, containing cinnamic acid, causes a protective leucocytosis, for the occurrence of fever certainly shows a preliminary sepsis. This 'embalming of compound fractures' merits investigation by our native surgeons."

POTATOES IN DIABETES.—Sir J. Swayer says in the *British Medical Journal* that giving potatoes to diabetic patients is one of the greatest dietetic advances of our times. While they are permissible cooked in the ordinary ways, they are best prepared by straining with the skin on. He proposes that flour made from properly cooked potatoes should be used instead of flour made from grain for the bread of diabetics.

CATGUT STERILIZATION.—The *New York and Philadelphia Medical Journal* in a synopsis of an article from the *Centralblatt für Chirurgie* says: "Sal-kindsohn describes a modification of Block's method which has the advantage that the catgut does not become brittle after being preserved for some time. He places the commercial catgut upon glass rolls in a solution of one part of tincture of iodine and fifteen parts of spiritus vini (50°). It is kept in this solution for one week in a dark place. It is then sterile, it does not roll or stretch, does not tear or break, and is not brittle, yet it can easily be knotted. It is not absorbed too quickly in the wound, nor does it irritate the latter. It keeps in perfect condition for at least one year."

ALCOHOL DRESSINGS.—The *Medical Record*, quoting from a German contemporary, says: "Wohl recommends alcohol most highly as a wet dressing for local inflammatory processes. It is analgesic, stimulates vigorous reaction on the part of the tissues, and is powerfully antiseptic. According to the nature of the case, the strength used varies from seventy to ninety-five per cent., but it is better to begin at or near the upper limit, while below seventy per cent.

the beneficial effects are greatly decreased. The dressing is applied by soaking gauze in the fluid and applying it to the part and well over into the adjoining healthy region, and then covering with some water-proof material. It should be changed in from twelve to twenty-four hours."

APPETITE-JUICE AND THE ETHICS OF EATING.—J. G. Adami in the *Montreal Medical Journal* reviews Pawlow's experiments on dogs, by which it has been proved that there are two tides of secretion of the gastric juice: the psychic tide, set up by the sight of food, by the taste of the same, and by hunger, the juice of this tide (the appetite-juice) being relatively abundant, flowing for a considerable period, and having strong digestive powers, and the chemical tide, which is set up at a later period by the direct effect of the foodstuffs upon the gastric mucous membrane. The former is brought into activity by the higher centres; taking everything into consideration, it is the more important. Food eaten without relish and without appetite, although in itself most nutritious, may lie for hours within the stomach undigested. So, again, food eaten while the mind is diverted to other things may stay for long unacted upon, or is liable to undergo decomposition, and, irritating the mucous membrane, may lower its condition. If, therefore, dyspepsia is to be warded off, the food should be taken under such conditions that everything is directed, on the one hand, to remove the thoughts from the cares of daily life, and, on the other, to make the repast appetizing, so that the palate may be tickled and the flow of appetite-juice excited.

REMARKS UPON TEMPERATURE.—The *Medical Record* has a synopsis of an interesting article in the *British Medical Journal* as follows: "M. S. Pembrey considers first the temperature of the newly born. The conclusion drawn from numerous observations made at different times of the year and upon infants of different ages is that the power of regulating temperature is incompletely developed in the newly born. The regulation of the loss of heat is imperfect. This is markedly shown if the infant is insufficiently clothed when it is exposed to even moderate cold. The regulation of the production of heat by variations in combustion is also incomplete, and only within narrow limits can the newly born respond to changes of external temperature in a similar manner to the response of the adult. Many premature infants have been reared by proper attention to the temperature of their surroundings. Even moderate cold is not a stimulant but a depressant to premature infants, for they can regulate neither the loss nor the production of heat. The internal temperature of a healthy man shows a range from 98.8° F. to 100° F.; these are average figures for the temperature of the rectum or urine, and do not include the absolute physiological range. Muscular exercise causes a marked rise in the temperature of the rectum and urine of healthy men. There is no evidence to show that the rise in the internal temperature is injurious; it seems that it may be beneficial. Undoubtedly heat-stroke and heat-exhaustion are due to a disturbance of the nervous control of temperature, brought about in most cases by muscular exercise in unsuitable clothes and in hot surroundings laden with moisture. In the healthy man the nervous control of temperature is so well developed that his internal temperature is practically the same whether he be living in the Arctic regions or in the tropics. A man can compensate for large differences in external temperature even apart from alterations in clothing. The two natural

methods of increasing combustion are cold and exercise. Alcohol acts upon the vasomotor system and also upon the nervous control of the production of heat. The lowest temperatures recorded in men, who have recovered, appear in drunkards who have been exposed to cold. Anæsthetics rapidly paralyze the nervous regulation of temperature. Under pathological conditions the temperature of man shows a range of about 39° F., from 75.2° F. to 114.8° F. Higher and lower temperatures have been observed in moribund patients. These temperatures, however, are well authenticated, and have been observed in cases in which recovery took place"

CARE OF THE INSANE.—The *Medical Record*, quoting from an English journal, says: "The most notable feature of the *Hospital* article is its advocacy of the employment of female nurses in the care of the insane. In some districts of Great Britain this system has been followed with much success. According to the *Hospital*, the admission is made by those who have had the longest experience, both in this country and abroad, that female nursing is preferable for sick and infirm men, and it is also believed by many that the presence of women in asylum wards obviates proportionately to their number and influence those regrettable personal conflicts which tend to occur from time to time when insane men are wholly attended by individuals of their own sex. There are, undoubtedly, many cases of insanity in which women are better fitted as attendants than men. On the other hand, a large class of insane persons require male nurses, as female attendants would not, by reason of their inferior strength, be able to restrain them when violent. Perhaps the best plan would be to have in every asylum a certain number of female nurses who could take charge of those patients deemed suitable for such care by the physicians."

THE TEETH AS A FACTOR IN DIGESTIVE DISEASES AND DISORDERS.—J. A. Storck says in the New Orleans *Medical and Surgical Journal* that during dentition disturbances of the stomach and bowels increase in frequency. Cases of indigestion due to the neglect of the temporary teeth are frequent. If deformities of the vault, palate, and teeth are corrected in early infancy, much discomfort may be avoided and the patient saved from becoming a chronic dyspeptic. Bacteria multiply in a dirty mouth and tend to cause a loss of appetite. Digestive disturbances often disappear after proper care of the teeth.

PREMATURE BURIAL.—Many persons have a morbid horror of being buried alive. The Boston *Medical and Surgical Journal*, commenting upon a bill to prevent premature burial which it is proposed to present to the Legislature of Massachusetts, says: "It is an occurrence which is less likely to happen than being struck by lightning. In several cities of southern Germany establishments have existed for many years (since 1821 in Munich and for more than a century in Weimar) where the bodies of deceased persons are exposed for at least two days. The writer visited two of the cemeteries in Munich a few years since where these reception houses exist, one near the centre of the city, another outside the city across the river Isar, and learned that out of the many hundreds of thousands of corpses that have been brought to them during these many years, not one has ever shown signs of life."